

Augusta
Environmental Services
Generator's Non-Hazardous Waste Manifest

Reference Profile Number: _____

WASTE GENERATOR

Generator Name: _____ Email Address: _____
Physical Address: _____ Phone: _____
City/State/Zip: _____ Fax: _____

Authorized Agent/Contact Name/Title: _____

Description of Waste: _____
Amount: _____

I hereby certify that the above-described materials are not hazardous waste as defined by 40 CFR 261 or any applicable state law, have been fully and accurately described, classified, and packaged, and are in proper condition for transportation according to applicable regulations.

Generator Authorized Agent Signature

Date

WASTE TRANSPORTER

Company Name: _____ Driver Name: _____
Address: _____ Truck Number: _____
City/State/Zip: _____ Shipment Date: _____
Phone: _____ Delivery Date: _____

I hereby acknowledge the receipt of the above described materials from the generator site listed above. I hereby acknowledge that the above-described materials were transported without incident to the destination listed below.

Driver Signature: _____

DESTINATION – WASTE DISPOSAL FACILITY

Disposal Facility: _____ Augusta Deans Bridge Road MSW Landfill _____ Phone: _____ 706-592-3200
Address: _____ 4330 Deans Bridge Road, Blythe, GA 30805 _____ Permit #: _____ 121-108D(MSWL)
Ticket Number: _____ Tonnage: _____ Cell/Lift: _____

I hereby acknowledge receipt of the above-described materials.

Name of Authorized Agent (print)

Signature

Date

BILLING

Bill the load described above to (circle one): Generator Transporter Other: _____

HAZARD INFORMATION

